Rest Available Copy

PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number					
								30108euc)					
Effective October 1, 2000								201098 452					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			103				F	ATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BA	BASIC FEE 355.00		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/03 minus 20=		. 83		>	X\$ 9=		OR	X\$18=	1494.02	
INDEPENDENT CLAIMS			/2 minus 3 =		. 9		5	X40=		OR	X80=	720.00	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					105		1		120:00	
* If the difference in column 1 is less t				s than zero, enter "0" in column 2				+135=		OR	+270=	2001	
								OTAL		OR		2924.02	
CLAIMS AS AMENDED - PART II 7/11/65 (Column 1) (Column 2) (Column 3)						SI	SMALL ENTITY			OTHER SMALL I			
AMENDMENT A		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	BER DUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL FEE	
	Total	• 100 j	Minus	PAID	FOR :	-		\$ 9=	FEE	OR	X\$18=	PEE	
	Independent	· 12-	Minus	***		9		46€	() () () () () () () ()		X80=		
4	FIRST PRESE	JLTIPLE DEF	PENDEN	CLAIM			405	_	OR	∧ou= :	z·		
	•							135=		OR	+270=		
								TOTAL IT. FEE		ON	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE'	ADDI- TIONAL FEE	
	Total	• '	Minus	*		=		X\$ 9=		OR	X\$18=		
WE	Independent	•	Minus	***		=		40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=		OR	+270=		
/ I							TOTAL			TOTAL			
							ADD	IT. FEE		jon	ADDIT. FEE		
		(Column 1) CLAIMS		(Colu		(Column 3)	I			1 1			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus'	••		= ' '	X	5 9=		OR	X\$18=	:	
	Independent	•	Minus	***		=	l x	40=		OR	X80=	-	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un			
+135= OR +270=													
••	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		mber Previously Pai iber Previously Pai					er found in	the app	ropriate box	in cot	umn 1.		